

# **Real Talk:**

## **Effective Motivational Techniques**

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- What have you heard about Motivational Interviewing?
- How many have used it/tried some of the techniques in their job?

This is going to be about  
motivating clients...

As well as ourselves

- How many feel successful in their job/get the results they want from clients?
- How many of us keep on doing things the same way?
- How come?
  - What feels comfortable with consistency of routine?

*In our brief time together  
we will talk about  
us doing something different:  
**THAT'S WHERE WE HAVE CONTROL***


Definition of **Insanity**: *“doing the same thing  
over and over and expecting different results.”*

What might be going through  
a client's head?

*As we try to motivate the client,  
to encourage client to change their behavior.*

How about what's going  
through your head?

How might these impact  
your time with the client?  
(i.e. how you present,  
communicate with the client)



*We might need to motivate ourselves, too:  
Motivate ourselves  
to try something different.*

*“We might not be able to change the winds: but we can adjust the sails.”*

*THAT’S WHERE WE HAVE CONTROL:  
You and I doing something different*

# **Real Talk**

**isn't just with the client...**  
**it's also with ourselves:**

it's what we tell ourselves  
that can help us do our job,  
talk that helps us be creative, flexible...  
or that contributes to us feeling  
stifled, frustrated, angry... or burnt out.

Our self-talk effects how we react, feel,  
and can help limit or expand our creativity and options!

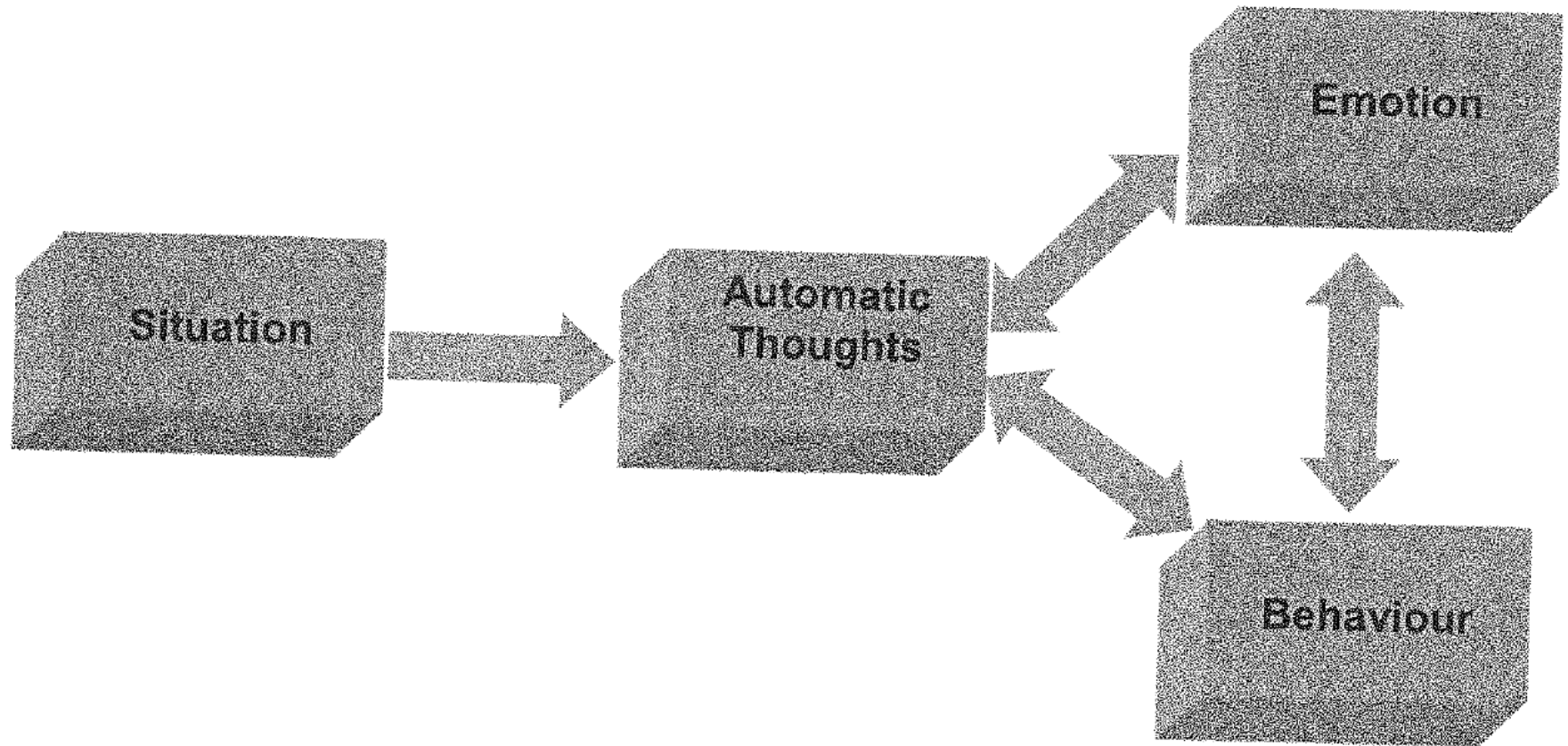
- What do you tell yourself about how successful/ unsuccessful you are?
- What goes on in your head when you are with a client
  - whose values are different than yours?
  - who makes it harder for you to do- or be successful in- your job?
- What do you tell yourself when you don't get names?

Think for a second...

-How do those thoughts influence your behavior/what you say or do?



# Thoughts Influence our Emotions... and then our Behavior



# Different Thoughts can Lead to Different Emotions

Situation	Automatic Thought	Emotion
1. A friend is late for the movies.	I hope he's all right and nothing happened.	
2. A friend is late for the movies.	He's always late!!	
3. A friend is late for the movies.	I guess he doesn't like me and doesn't want to be my friend.	

- What kind of behavior might each of these emotions lead to?
- How might each thought influence how we react/act towards the person?

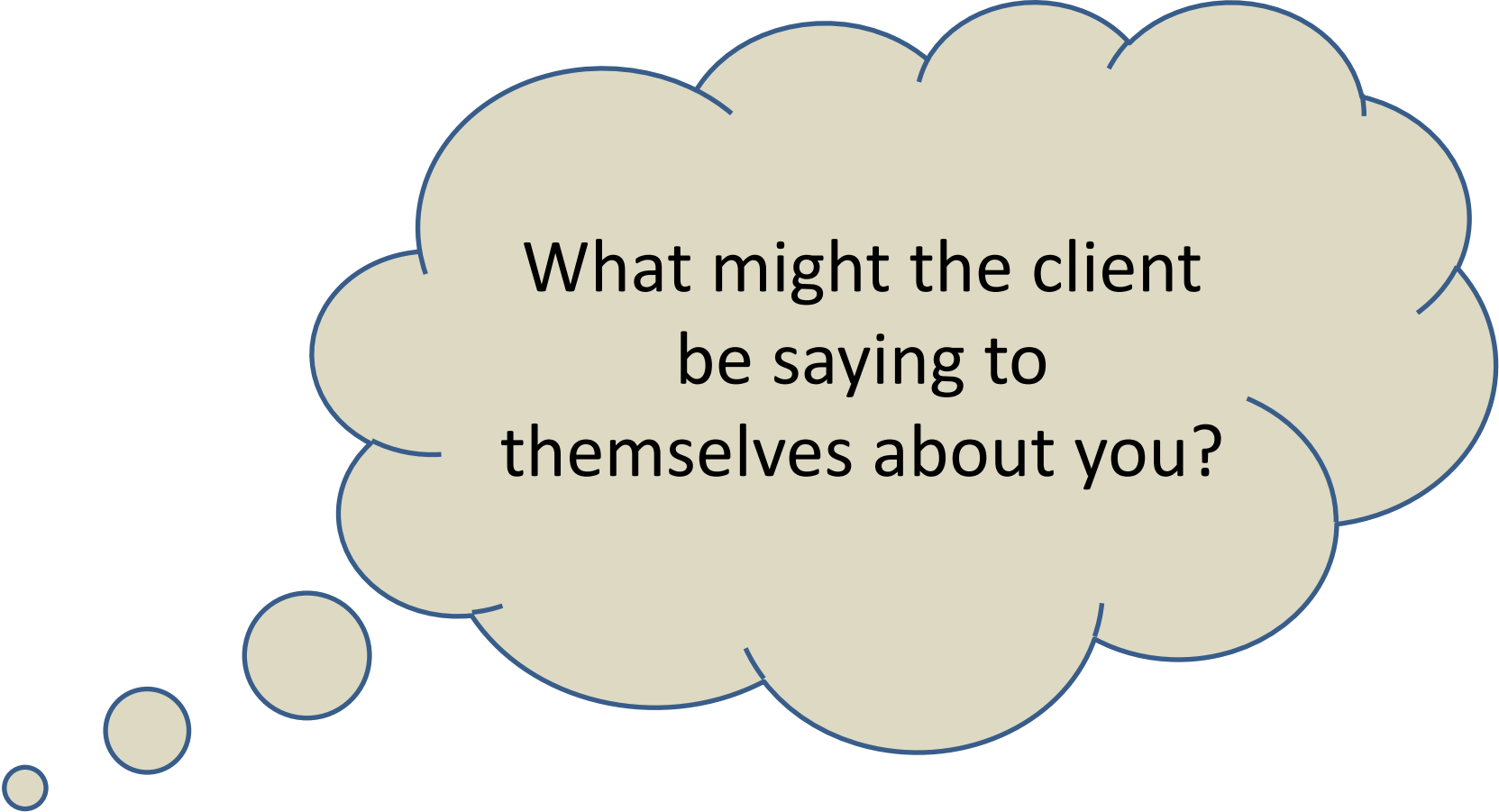
**So what does that have to do with us  
in our professional role?**

Situation      Thought → Emotion → Behavior

Person won't give  
you names

Person is back  
at STD Clinic

???????



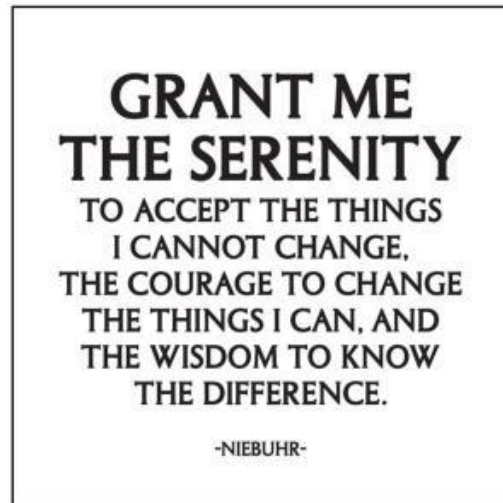
What might the client  
be saying to  
themselves about you?

Think for a second...

- How might that contribute to their response to you/  
their behavior?
- What might you do to help change their self-talk?
- What could someone say to you if you were in client's position?

# Changing the self messages, the tapes in our heads:

- Be aware of your thoughts, interrupt them, then challenge them
- Redefine personal success, reframe it
- Affirmations
- Let unhelpful thoughts go past without getting caught up in them
- Remind ourselves what we have control over and what we do not have control over



What have you done  
or have told yourself...

- that helps you to  
try a new strategy
- to change your self-talk
- that inspires you  
to do something different?

*How do you usually motivate yourself to make a change?*

- You'll be having a *Resilience and Stress Management* talk later which will be focused on you taking care of yourself...

## **NOTICING and CHANGING YOUR THOUGHTS**

are part of taking care of yourself and reducing stress,  
and can lead to new ways of being with clients,  
staying engaged with your job, avoiding burnout...

To say nothing of helping you cope with stressors  
in your personal life

And now...

# Motivational Interviewing



# What is Ambivalence?

**Ambivalence** means that....

- they have mixed feelings about doing/saying something
- they feel conflicted, uncertain
- they may be weighing their options, consequences

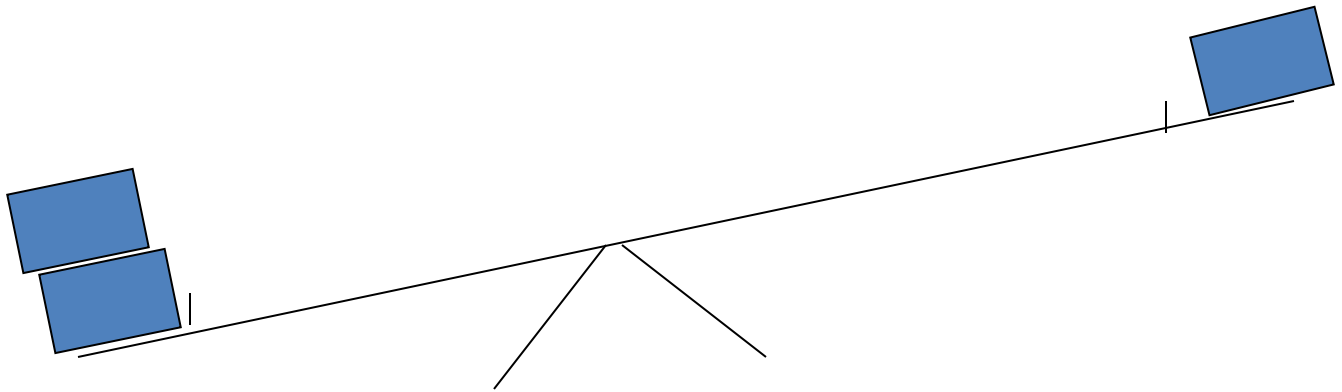
- Or they may not want to think about it because it's uncomfortable, anxiety producing... maybe because they know they can't do it



# AMBIVALENCE

(about a decision or about making a change)

## IS LIKE A SEESAW



Encourage exploration of ambivalence

*The Cost/Benefit, Risks/Rewards involved*

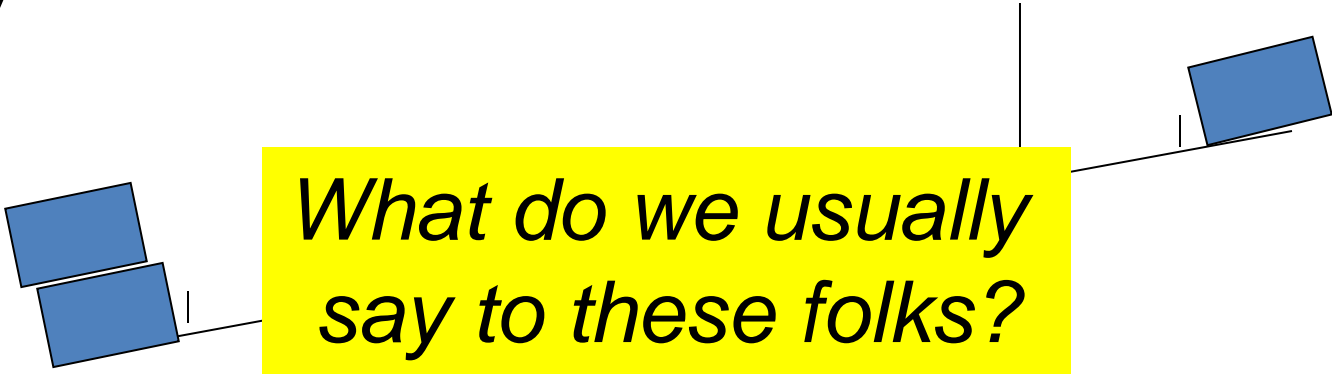
# *Who usually tells the patient the reasons/advice/tries to convince patient to engage in the 'healthier' behavior?*

Reasons **to not engage** in

'Unhealthy' behavior

Reasons **to engage** in

'Healthier' behavior



*What do we usually say to these folks?*

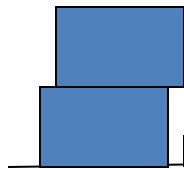
- Not taking meds
- Not using protection for sex
- Smoking
- Not exercising
- Not checking blood sugar
- Not taking an HIV test
- Doing drugs

- Taking meds
- Using Protection
- Stopping Smoking
- Exercising
- Checking blood sugar
- Taking an HIV test
- Not doing drugs

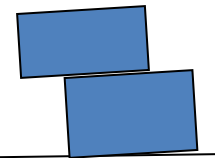
***Help clients add bricks to the right side  
by asking questions, discussing,***

***rather than just telling them the reasons it may be 'good'  
to adhere to meds, to give you names, to test for HIV...***

~~Bad~~



~~Good~~



Unhealthy behavior

Healthier Behavior

Goal is to increase the reasons for making a change  
**from the patient's point of view.**

*This means*  
***Asking, Drawing out***  
***vs***  
***Telling...***

*So we can find out what's important*

**REAL**

*to that person  
and 'use' that...  
Then educate*

**TALK**

*where we need to educate*

# It's a Balancing Act

*Choosing when to be*

***PERSUASIVE***

***vs.***

***INTERACTIVE***



Lecturing/  
Educating/Pushing

Engaging in a conversation/  
Asking Questions/Helping  
client to weigh or to explore

What tool are you going to use from your tool kit?

# **Key Goal of MI:**

**To elicit behavior  
change by helping  
clients explore and  
resolve *ambivalence***

*“Working with ambivalence is working  
within the heart of the problem.”*

Miller and Rollnick



In MI, we help patients  
to think about, explore , and  
Surface their AMBIVALENCE...

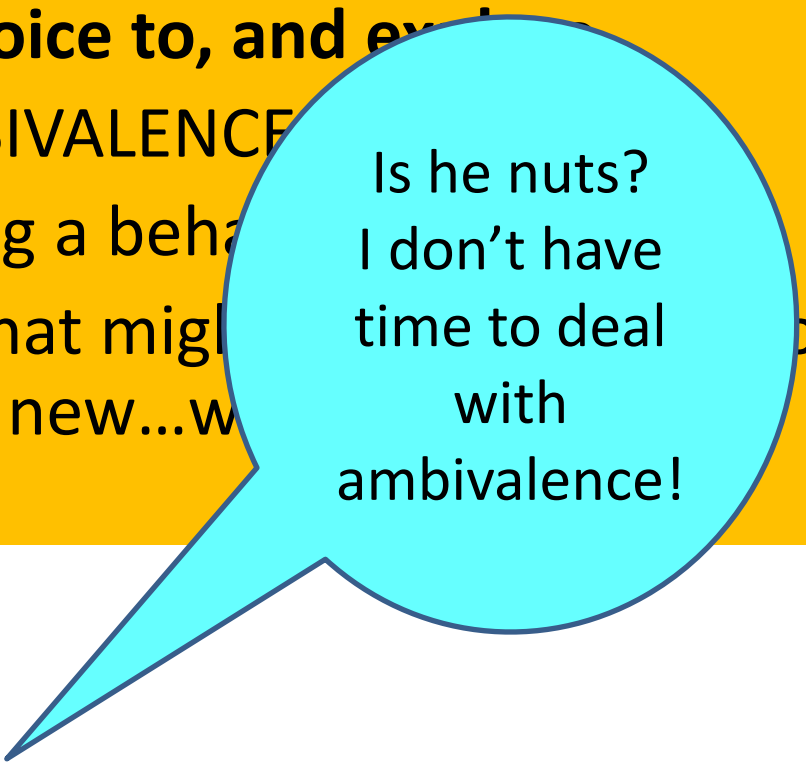
**Get the patient to struggle internally  
and not with you...**

*Learning the clients' perspective  
on their issues*

*while I suspend mine...*

*What has weight/impact for him/her?*

In MI, we help clients  
**think about, give voice to, and explore**  
their AMBIVALENCE  
about changing a behavior



Is he nuts?  
I don't have  
time to deal  
with  
ambivalence!

Then once we hear or guess what might be  
try something new...we

You are already 'dealing' with ambivalence with many patients:  
The question is ***“Will you actively engage it...or not?”***

To sum up:

"People are generally better persuaded by the reasons they have themselves discovered than by those that enter the minds of others..."

Blaise Pascal, Mathematician  
& Theologian (1623-1662)

"If you argue for one side, an ambivalent person is likely to defend the other."

Roy Berkowitz  
Gay NY Jewish Buddhist with much  
ambivalence (1951- )

# How do we help clients to **explore** ambivalence?

- *What would that be like for you, giving me her name?*
  - *What makes it difficult? What might it feel like initially? Later on?*
- *What's the worst/best thing that might happen if you*
  - *gave me his name?*
  - *continued to do this behavior?*
    - What would that be like for you? What could you do if that happened?*
- *If she never knows that she's been exposed... What do you imagine will happen? What's that like for you, knowing that?*
  - *What would you want someone else to do if they exposed you but wouldn't give me your info to help you? How come?*

-

**What do you notice  
about these statements?**

# Looking Backward and Forward:

## Not Taking Meds as prescribed

- *“What might happen if you didn’t take your meds/continued to\_\_\_\_? How would that be if that happened? For you/others?
  - What would it be like telling \_\_\_\_\_ [a parent, friend, spouse, etc] that you \_\_\_\_\_/ that you won’t \_\_\_\_\_?
  - How might that affect your life? Your relationship(s)? Your dreams (or the next 6 months)?”*
- “If that happened, how might that effect your day to day life?”***
  - Like walking your dog?/Going to the gym?/Visiting your folks for the holidays?”*
    - *“So what would it be like not being able to walk Buster? Or not being able to work out?, etc.”*

# Decisional Balance Questions

- *1. What do you see as a disadvantage about/ problem with doing/trying this new behavior?*
- *2. What do you see as an advantage/benefit about doing this new behavior? What might you like about that?*
- *3. What are you liking about this [present] behavior? What's not so great about what you're doing now? How come?*
- *4. What might you miss about not doing this [present] behavior? Not miss?*

# Decisional Balance Questions (cont)

- *5. What makes it more difficult for you to do the new behavior? What might make it easier for you to do the behavior?*
- *6. Who [individual or groups] do you think would (or did) disapprove or object of you doing the new behavior?*
- *7. Who [individual or groups] do you think would (or did) approve or support your doing the new behavior?*

Ask questions,  
Stir up dissonance\*,  
and let them struggle...

They may not resolve it right then and there...

## PLANT SEEDS

Instead of...

Just teaching/ Always educating  
about the importance ...  
of taking a test, giving names, etc.

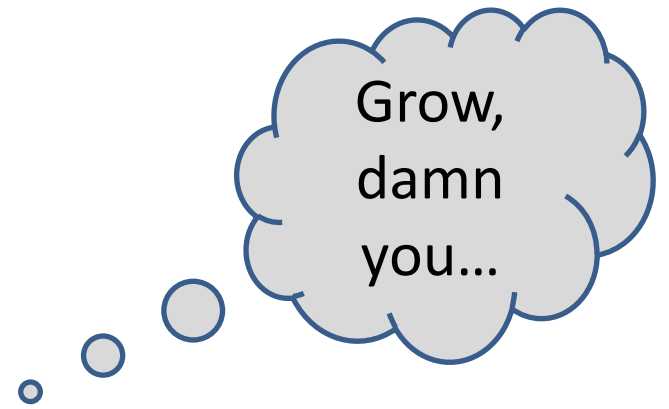
\* The way one is living now as opposed to the way one wants to live



It's the client who decides what to tell you,  
to change a behavior so...

What might we say or do to foster a client's  
decision/sense of control?

What might we need *to stop saying/doing* to  
enhance the likelihood  
that a client will try changing, give a name, etc?



This short time was meant to PLANT SEEDS